

<b>POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"><b>Application Number</b></td> <td>10/524,250-Conf. #4662</td> </tr> <tr> <td><b>Filing Date</b></td> <td>October 6, 2005</td> </tr> <tr> <td><b>First Named Inventor</b></td> <td>May GRIFFITH</td> </tr> <tr> <td><b>Title</b></td> <td>BIO-SYNTHETIC MATRIX AND USES THEREOF</td> </tr> <tr> <td><b>Art Unit</b></td> <td>1618</td> </tr> <tr> <td><b>Examiner Name</b></td> <td>E. E. Silverman</td> </tr> <tr> <td><b>Attorney Docket No.</b></td> <td>OHR5-001US</td> </tr> </table>	<b>Application Number</b>	10/524,250-Conf. #4662	<b>Filing Date</b>	October 6, 2005	<b>First Named Inventor</b>	May GRIFFITH	<b>Title</b>	BIO-SYNTHETIC MATRIX AND USES THEREOF	<b>Art Unit</b>	1618	<b>Examiner Name</b>	E. E. Silverman	<b>Attorney Docket No.</b>	OHR5-001US
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I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.  
 OR  
☒ I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

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OR  
☐ I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

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I am the:

☐ Applicant/Inventor.  
 OR  
☒ Assignee of record of the joint interest. See 37 CFR 3.71.  
 Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on \_\_\_\_\_

SIGNATURE of Applicant or Assignee of Record			
Signature	<i>Marielle Piche</i>	Date	17. 8. 09
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Title and Company	NATIONAL RESEARCH COUNCIL OF CANADA / Secretary General		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ \*Total of 2 forms are submitted.